PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to:

Box ISSUE FEE
Assistant Commissioner for Patents

Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

02/22/2002

TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER **EIGHTH FLOOR** SAN FRANCISCO, CA 94111-3834

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the
United States Postal Service with sufficient postage for first class mail in an
envelope addressed to the Box Issue Fee address above on the date
indicated below.

(Depositor's name	•	JoAnn Evangelista
(Signature	lista	Jan ruged
(Dette		March 6, 2002

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/466,353	12/17/1999	CHISHTI MUHAMMAD	18563-000120	1064		
TITLE OF INVENTION: METHOD AND SYSTEM FOR INCREMENTALLY MOVING TEETH						

TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
71	nonprovisional	NO	\$1280	\$0	\$1280	05/22/2002
EXA	MINER	ART UNIT	CLASS-SUBCLASS			
WILSO	N, JOHN J	3732	433-024000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.			the names of up to or agents OR, alter single firm (having attorney or agent)	the patent front page, 1 3 registered patent attractively, (2) the name 3 as a member a register and the names of up comeys or agents. If no ill be printed.	orneys 1 Townsend	<u>-</u>

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ALIGN TECHNOLOGY, INC.

SANTA CLARA, CALIFORNIA 95050

· · · · · · · · · · · · · · · · · · ·					
Please check the appropriate assignee category or categories (wil	Il not be printed on the patent)	O individual	corporation or other private group	entity Q government	
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
✓ Issue Fee	☐ A check in the amount of the fee(s) is enclosed.				
☐ Publication Fee	☐ Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies	☐ The Commissioner is he Deposit Account Number	reby authorized by	charge the required fee(s), or credi (enclose an extra copy of this form	t any overpayment, to i).	
The COMMISSIONER OF PATENTS AND TRADEMARKS is application identified above Reg. No. 29,541	requested to apply the Issue Fee	and Publication Fe	e (if any) or to re-apply any previou	isly paid issue fee to the	
YN _	Date) March 6, 2002				
NOTE: The Issue Fee and Jubication Fee (if required) will other than the applicant; a registered attorney or agent; or interest as shown by the records of the United States Patent and	the assignee or other party in	03/21/2002	HFANNEI1 00000092 201430	09466353	
Burden Hour Statement: This form is estimated to take 0.2 hou depending on the needs of the individual case. Any comments to complete this form should be sent to the Chief Information and Trademark Office, Washington, D.C. 20231. DO NOT SI FORMS TO THIS ADDRESS. SEND FEES AND THIS Assistant Commissioner for Patents, Washington, D.C. 20231	on the amount of time required n Officer, United States Patent END FEES OR COMPLETED	01 FC:142 02 FC:561	1280.00 CH 30.00 CH		
Linder the Paperwork Reduction Act of 1995, no persons	are required to respond to a				

collection of information unless it displays a valid OMB control number.